## STATE OF MAINE



# COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station, Augusta, Maine 04333-0135 Office: 242 State Street, Augusta, Maine Tel: (207)287-4179

Tel: (207)287-4179 FAX: 287-6775 Website: www.maine.gov/ethics

# STATEMENT OF SOURCES OF INCOME 1 M.R.S.A. §§ 1016-A et seq.

COVERING THE CALENDAR YEAR
JANUARY I, 2006 THROUGH DECEMBER 31, 2006

FULL NAME: Richard John Rurar	Please check the appropriate box and fill in the District number.
CITY: BROWN	Member of the Senate, District
ZIP CODE: $03901$ PHONE NUMBER: $207 - 698 - 1526$	Member of the House, District 145

#### GENERAL INSTRUCTIONS

1. Please file this statement with the Clerk of the House or the Secretary of the Senate by:

## 5:00 p.m. on February 15, 2007.

- The report covers you, your spouse, and your dependent children.
- 3. Report only specific sources of income. Dollar amounts need not be listed.
- 4. Campaign contributions duly recorded as required by law need not be reported in this statement.
- Attach additional sheets if needed. Label attachments with your name, address, and the date.
- 6. Please sign on Page 4.
- 7. The completed statements will be posted as a 'pdf' on the Commission's website.
- 8. State law (1 M.R.S.A. § 1018) requires Legislators to file an updated statement with the Commission within 30 days of any change to the information relating to the preceding year. Additionally, the law (1 M.R.S.A. § 1016-B (2)) requires Legislators to make a supplementary statement to the Commission of any reportable liability within 30 days after it is incurred.

PLEASE KEEP A COPY OF THIS STATEMENT FOR YOUR FILES.	
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Disclosure statements are made available to members of the public upon request.

Thank you for your cooperation.

PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER. Name each employer from whom you received compensation of \$1,000 or more. Specify also the principal type of economic activity of each employer.

(For Legislators who are self-employed.) major areas of economic activity from which you dericiation, or similar business entity, list the major areas  Major Areas of Economic Activity (partnership, association or similar business entity) (partnership, association or similar business entity)  represents more than 10% of your gross income or conomic activity of the entity or person from whom you law, rule, or an established code of professional ethics or person from whom the income was derived.  Principal Type of Economic Activity of Entity or Person Who Is the Source of Income
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ME Howardoune
o are attorneys-at-law only.) List your major areas of of your firm.
ctice Major Areas of Practice (firm)
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PART IV. OTHER SOURCES OF INCOME. Name each source of income of \$1,000 or more not listed in Parts I, II, or III of this form. Do not include gifts. If none, so state.

Name of Source	$\underline{\text{Address}}$	Kind of Income
1. lue rest 5	n aportment to	terets
s. we oggorat	e an Antiques	Store
3. Both are	at our eringa	, residence at
55 56	had St, Bera	nit
	ORTABLE LIABILITIES. List the nage the reporting period, and list the major a	ames of creditors for any unsecured loans of reas of economic activity of each creditor. D
Name of Creditor	Address of Creditor	Principal Type of Economic Activity of Creditor
à		
)	N/A	
3		, Ada,
ggregate value of more than \$300 from	a single source. If none, so state.	<u>4</u>
PART VII. DISCLOSURE OF HO	NORARIA. List the source of any hor o state.	noraria accepted for appearances or speeches
	3	4
h	4	
ou represented or assisted others for cor	EFORE STATE AGENCIES. Identify impensation of any amount. If none, so sta	each executive branch agency before which
	3	<del></del>
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PART V INCOME DECERTED BY MEMBERS OF	E ENGRADOR A COR TO A BASE SA
PART X. INCOME RECEIVED BY MEMBERS OF	FIMINIEDIATE FAMILY.
List the type of economic activity representing each sour	ce of income of \$1,000 or more received by your spouse or dependent
income received by spouse and (D) beside sources of inc	ome represented. Do not include gifts. Indicate (S) beside sources of ome received by dependent(s).
Type of Economic Activity	
Representing Each Source of Income Received	Tr. 1 DT
1 2 7	Kind of Income
1. Hotel Front Desk	Englosine
2.	
3	
4	
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The intentional filing of a false statement shall be	be a Class E crime. If the Commission concludes that it
appears that a Legislator has willfully filed a fa	lse statement, it shall refer its findings of fact to the
appears that a Legislator has willfully filed a fa Attorney General. If the Commission determin	lse statement, it shall refer its findings of fact to the es that a Legislator has willfully failed to file a required
appears that a Legislator has willfully filed a fa Attorney General. If the Commission determin statement or has willfully filed a false statement interest on every question and shall be preclude	lse statement, it shall refer its findings of fact to the les that a Legislator has willfully failed to file a required t, the Legislator shall be presumed to have a conflict of led from voting on any question in committee or in either
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